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COUNTY BOROUGH OF BLACKBURN

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EDUCATION COMMITTEE

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# ANNUAL REPORT

UPON THE  
SCHOOL HEALTH SERVICE

For the Year 1960

By

J. ARDLEY, M.B., B.S., D.P.H.

Principal School Medical Officer





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# OFFICERS EMPLOYED IN THE SCHOOL HEALTH SERVICE

## Principal School Medical Officer

J. ARDLEY, M.B., B.S., D.P.H.

## Deputy Principal School Medical Officer

J. Q. MOUNTAIN, B.Sc., M.D., D.P.H.

## School Medical Officers

IRENE S. DAILEY, M.A. (Camb), M.R.C.S., L.R.C.P., D.P.H.

SUSAN HETHERINGTON, M.D., Ch.B. (to Sept)

EILEEN PARKINSON, M.R.C.S., L.R.C.P. (to March)

D. S. ROSS, M.D., Ch.B., D.P.H. (from Aug)

DERYL SEPHTON, M.D., Ch.B., D.P.H. (from Aug)

## Assistant Medical Officers (Part-time)

E. CARTER, M.D., D.P.H.

C. Y. HOWARTH, M.D., Ch.B.

MARGARET S. GISDOURNE, M.D., Ch.B.

D. S. ROSS, M.D., Ch.B. (to July)

## Part-time Consultant Medical Officers

J. EVANS, M.D., F.R.C.S., (Oto-Rhinology)

A. L. McADAM, M.D., (Cardiology)

E. J. MITCHELL, M.D., Ch.B., D.O. (Ophthalmology) (to January)

R. WARD, M.D., M.R.C.P., (Chest Physician)

P. R. STEVENS, M.R.C.S., L.R.C.P., D.O., (Ophthalmology) (from July)

## Part-time Consultant Orthodontist

L. C. G. HODGKINS, L.D.S.

## Dental Officers

J. RIGBY, L.D.S., Principal School Dental Officer

J. GREGSON, B.D.S.

## Superintendent Nursing Officer

MISS L. M. BROWN

(S.R.N., S.C.M., H.V. Cert., Cert. R.S.H.)

Health Visitor/School Nurses: Superintendent: Miss M. Jones,  
(SRN., SCM., HV Cert.) (to Dec)

Miss V. E. GILL, SRN, SCM, HV Cert., QS	Miss M. LONGWORTH, SRN, SCM, HV Cert.
Miss M. THEXTON, SRN, SCM, HV Cert., QS	Miss M. WILSON, SRN, SCM, HV Cert.
Miss I. BARLOW, SRN, SCM, HV Cert.	Miss G. P. ODDIE, SRN, SCM, HV Cert.
Miss M. DUXBURY, SRN, SCM, HV Cert., QS	Miss A. M. EDDIE, SRN, SCM, HV Cert.
Mrs. M. A. MORLEY, SRN, SCM, HV Cert., QS	Mrs. M. G. SANDBACH, SRN, HV Cert.
Mrs. G. O. CLARK, SRN, SCM, HV Cert., QS	Mrs. J. HOLGATE, SRN, HV Cert.
Miss K. MOLLOY, SRN, SCM, HV Cert.	Mrs. E. M. WARD, SRN, SCM, HV Cert.
Mrs. A. F. DOYLE, SRN, SCM, HV Cert.	Mrs. H. D. CUMMINGS, SRN, SCM, HV Cert.
Miss D. DARDYSHIRE, SRN, SCM, HV Cert., QS (to July)	Mrs. P. HOEDS, SRN, SCM, HV Cert. (to Sept)
Mrs. G.A. WHITESIDE, SRN, SCM, HV Cert., QS (to June)	Mrs. M. WADDINGTON, SRN, SCM, HV Cert. (to Oct)

School Nurses:

Mrs. H. E. CARTER, SRN.  
Miss J. A. FAY, SRN., SCM. (to July)  
Miss D. M. MCGOUGH, (from Jan)  
Mrs. A. MASTERS, (from Aug)  
Mrs. G. J. ELLIS, (from Sep)  
Mrs. J. P. JAMES, (from Sept. to Nov)  
Mrs. H. CROOK, (from May to Aug)

Physiotherapists:

Mrs. M. KEMPTON, C.S.P. (Senior Physiotherapist)  
Mrs. D. YATES, C.S.P. (Part-time) (from June)  
Miss E. HYDE, C.S.P. (to June)  
Miss M. HORNE, C.S.P.

Orthoptists

Miss A. P. WILLIAMS, D.B.O. (to March)  
Miss S. C. SPEIGHT, D.B.O. (from January)

Speech Therapist:

Miss A. M. ORR, L.C.S.T.

Dental Attendants:

Miss M. TOTTY. (Senior Dental Attendant)  
Miss L. E. WALSH  
Miss H. WHITTAKER

Clinic Attendants:

Miss E. CLAYTON,  
Miss D. M. WATTS.

Public Health Department,

Victoria Street,

Blackburn.

August, 1961.

Mr. Chairman, Ladies and Gentlemen,

May I present my second Annual Report, being the 55th of the series, on the work of the School Health Service during 1960.

Staffing continues to be a difficult problem. It is essential in the interests of the service that, not only should replacements be available, but also that stability be established.

In my report for 1959, I referred to the necessity of divisionalisation to establish continuity, so leading to proper rapport between teachers and doctors, and the expansion of the routine inspection service into one more consultative in character.

Unfortunately, almost as soon as the department was fully staffed, two resignations followed, both for domestic reasons. Dr. Eileen Parkinson, who had worked in the department for many years on a part-time basis, left for Northampton just a few months after taking up full-time duties. Dr. Susan Hetherington, appointed in October, 1959, left in September, 1960, on securing an appointment with the Lancashire County Council at Preston.

The Health Visiting Service also, suffered badly through resignations and sickness. At the beginning of the year, 22 were employed, being reduced to 17 by December, of which 14 were actually on duty. The premature death of Mrs. G. A. Whiteside saddened us all. She had given many years of service to the people of Blackburn, as a District Nurse and later as a Health Visitor/School Nurse, and we sympathise with her husband in the loss of a bright and cheerful personality, and one who was still young enough to have expected many more years of happy life.

The only change of note during the year was the start of an Audiometric Survey in the Schools and the formation of a Clinic to which cases could be referred. A full report on the work is given on Page 18. Precision in this field of work was limited by the presence of adventitious or background noise, either in school or clinic which tended to confuse results. Nevertheless, the Surveys were of real benefit and brought to notice many children who will undoubtedly enjoy an increased capacity for learning following therapy or the use of "hearing aids".

In the field of Mental Health, the ascertainment of Educationally Subnormal Pupils improved by the formal approval of Dr. Bailey consequent upon her attending the London training Course. This aspect of the department's work will never be fully efficient until each School Medical Officer is approved and can investigate pupils referred by the Head Teachers of the group of schools for which he is made responsible. Under such circumstances, early ascertainment and early placement would contribute to preventing some of the delinquency and maladjustment so properly mentioned in the report of Mr. Duerden, Headmaster of Four Lane Ends School (Page 27).

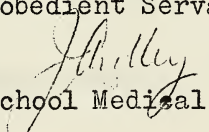
The replacement of this special school for educationally subnormal pupils by one with substantially more places and better amenities would enable a number of pupils with lower intelligence attending the Open Air School to be transferred to a school more appropriate to their need, and would eliminate the waiting list which in December, 1960, stood at 47.

It is a characteristic of Special Schools that they contain pupils with multiple defects, and the three special schools in Blackburn are no exception. There is a higher incidence of speech difficulties, maladjustment, epilepsy and physical handicaps than in ordinary schools, and it reflects great credit on the staffs that they cope with their difficulties so efficiently.

In conclusion, I would like to record my thanks to all members of the staff for their assistance, and to members of the Education Committee my appreciation of their continued interest in the work of the School Health Service.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

  
Principal School Medical Officer.

# SCHOOL CLINICS

DESIGNATION	PURPOSE	WHERE HELD	TIMES
Inspection	Special Examination of Cases referred by Teachers, School Welfare Officers and School Nurses.	Victoria Street	Wednesday 2.0 p Saturday 9.30 a
Ophthalmic	Prescription of Spectacles	"	Monday 8.30 a Tuesday 8.30 a Thursday 2.30 p Friday 1.15 p (By appointment)
Dental Clinic	Dental Treatment	"	Every week-day (By appointment)
Minor Ailments	Treatment of Minor Diseases of Skin, etc.	"	Every week-day at 8.45 a.m.
Cleansing	Treatment of Scabies and Cleansing of Verminous Cases	Blakey Moor	By appointment
Physiotherapy	Treatment of Postural Defects, Sunlight	Victoria Street	Every week-day (By appointment)
Immunisation	Immunisation against Whooping Cough, and Diphtheria, and Vaccination against Poliomyelitis	"	Monday, 3.45 p. or by appointment
Vaccination	Vaccination against Smallpox Vaccination against Tuberculosis	"	By appointment
Ear, Nose and Throat	Treatment of Deafness, etc.	"	As required (By appointment)
Orthoptic	Correction of Strabismus	"	Every week-day (By appointment)
Heart, Rheumatism & Anaemia	Diagnosis and Supervision of cases suffering from Rheumatism and Heart Defects, and the investigation of Anaemia	"	By appointment
Speech	Correction of Speech Defects	St. Peter Street	Every Week-day (By appointment)

# COST OF SCHOOL HEALTH SERVICE

I am indebted to the Borough Treasurer, Mr. L. Wolstenholme, for the following particulars relating to the cost of the School Health Service during 1959-1960.

## EXPENDITURE

	£	s	d	£	s	d
Salaries ... ..	18503	17	5			
Fees .. .. .	1443	9	5			
Travelling Expenses .. .. .	227	3	11			
Printing, Stationery, etc. ....	189	16	9			
Drugs, Medical Requisites & Apparatus	1640	3	9			
Rents and Insurances , ... ..	40	12	5			
Superannuation - Employers' Contributions	989	6	6			
Equal Annual Charge	579	4	11			
National Insurance - Employers' Contributions	423	15	2			
Malt, Oil, Tonics etc. ... ..	64	3	9			
Fuel, Light and Cleaning .. .. .	964	8	10			
Upkeep of Buildings .. .. .	1901	9	8			
Spectacles . ... ..	216	16	5			
Sundries ... ..		18	9			
				£ 27185	7	8

## INCOME

Recovered from -

Blackburn Executive Council .. ..	496	17	6			
Health Committee - Dental Sessions	270	18	0			
Lancashire County Council -						
Orthoptic Clinics	328	10	0			
Regional Hospital Board -						
Orthoptic Clinics	249	19	2			
Speech Clinics	26	14	1			
Miscellaneous . ... ..	30	9	8	£ 1403	8	5

EXPENDITURE LESS INCOME

£ 25781 19 3

The rateable value of the Borough on 31st March, 1960, was £1,239,236. The gross cost of medical inspection and treatment in schools for the twelve months ended 31st March, 1960, was £25,782, compared with £21,961 in the previous year.

This was equivalent to £1.11.3. per child on the school rolls, and expressed as a penny rate was 5.32d.

### SCHOOL POPULATION

Particulars of children on the rolls at maintained schools are as follows:

	<u>No. on Rolls</u>
3 Nursery Schools ... ..	120
60 Primary School Departments ...	9601
14 Secondary Schools .. ...	6655
3 Special Schools ... ..	287
	<hr/>
Total ... ..	<u>16663</u>

# SECTION ONE

## MEDICAL INSPECTION

The programme of Routine Medical Inspection, adopted in 1955, has been continued.

The year's findings are set out on pages 10 to 12, whilst Table 1 below shows the numbers of children examined in years of birth of Groups examined.

Table 1

Year of Birth of Groups Examined	1960
1945 and earlier ... ..	620
1946 ... ..	450
1948 ... ..	455
1949 ... ..	931
1951 ... ..	46
1952 ... ..	120
1953 ... ..	66
1954 ... ..	191
1955 ... ..	290
1956 and later ... ..	275
Totals ... ..	3444

# ROUTINE MEDICAL INSPECTIONS DURING 1960

## (a) Attendance of Parents at Inspection

Table 2

Year of Birth of Groups Examined	Number Exam'd	Parents Present	% Parents Attendances	Boys	Girls
1945 and earlier ... ..	620	19	3.0	241	379
1946... ..	450	72	16.0	209	241
1948... ..	455	292	64.2	229	226
1949... ..	931	608	61.3	485	446
1951... ..	46	36	78.4	28	18
1952... ..	120	82	68.3	56	64
1953... ..	66	54	81.8	32	34
1954... ..	191	173	90.5	90	101
1955... ..	290	264	91.0	134	156
1956 and later ... ..	275	233	84.7	137	138
TOTALS... ..	3444	1833	53.2	1641	1803

## (b) General condition

The general condition of children examined at Routine Medical Inspection during 1960 was again satisfactory.

## (c) Visual Defects and External Diseases of the Eye

Two hundred and three children were found to have defective vision at routine medical inspection, all but five being referred for treatment.

In addition to those children with defective vision, twenty-four children were found with squint, whilst one child was recorded as suffering from "Other forms of external eye disease".

(d) Ear Disease and Hearing Defects

At Routine Medical Inspection, thirty-one children found to have ear trouble were dealt with as follows:

	Referred for treatment	Referred for observation	Total
Hearing .. ...	17	5	22
Otitis media .. ...	4	-	4
Other ... ..	3	2	5

(e) Nose and Throat

Thirty-five children were referred for treatment and twenty-one were placed under observation. .

(f) Defective Speech

At routine inspection, eight children were found to be suffering from speech defects, of which three were referred for treatment.

(g) Orthopaedic Defects

Forty-one children were discovered at routine medical inspection as follows:

	<u>Requiring treatment</u>	<u>For observation</u>	<u>Total</u>
Posture	12	1	13
Feet	22	4	26
Other	3	1	4

(h) Heart and Circulation

Five children were referred for treatment and one for observation as a result of defects found at Routine Medical Inspections.

(i) Lungs

Thirty-eight children were found to have respiratory defects of varying degree, twelve of which required treatment.

(j) Miscellaneous Defects

The following table sets out details of other defects found at Routine Medical Inspection:

Table 3

Defect	Requiring Treatment	For Observation	Total
Skin ... ..	31	2	33
Lymphatic Glands .. ..	-	2	2
Developmental			
(a) Hernia	5	2	7
(b) Other	1	2	3
Nervous System			
(a) Epilepsy	-	-	-
(b) Other	-	-	-
Psychological			
(a) Developmental	7	19	26
(b) Stability	8	3	11
Abdomen . . . . .	-	2	2
Other ... ..	14	42	56

Heights and Weights

Table 4

Year of Birth of Groups Examined	BOYS			GIRLS		
	No. Examined	Average Weight in inches	Average Weight in pounds	No. Examined	Average Height in Inches	Average Weight in Pounds
1945	241	64	124	379	62½	122½
1946	209	63	102½	241	61½	100
1947	-	-	-	-	-	-
1948	229	54½	78½	226	55½	76½
1949	485	54	74½	446	54½	72½
1950	-	-	-	-	-	-
1951	28	51	62	18	50	53½
1952	56	49½	55½	64	49	53½
1953	32	45½	49½	34	46	49
1954	96	43½	46½	101	43½	44
1955	134	41	40½	156	41½	36½
1956+	137	40½	39½	138	39½	35½

## Following-up

### (a) General

Three hundred and thirty-seven schildren, referred for observation at Periodic Medical Examination, were re-examined at the "Follow-up" Clinic. Head Teachers were kept informed of the results of these examinations.

### (b) School Nurses' Work

During 1960, School Nurses made 362 follow-up visits to the homes of children found to have defects at periodic medical inspection, and 119 regarding the cleanliness of children.

The following table sets out details of the work of the School Nurses during the year.

Table 5

#### VISITS TO SCHOOLS

	No. of Visits	Children Inspected
(a) Re Cleanliness ... ..	293	29345
(b) Re Infectious Diseases	-	-
(c) For Other Reasons ...	228	3444
Totals ..	521	32789

#### Cleanliness Inspections

(a) No. of children clean . ... ..	27134
(b) No. of Children with Nits or Pediculi	2211
Totals ... ..	29345

#### HOME VISITS

(a) Re Uncleanliness .. ... ..	119
(b) Defects found at Routine Inspection	362
Totals ... ..	481

NUMBER OF CLINIC SESSIONS ATTENDED ... ..	779
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# SECTION TWO

## TREATMENT

### Clinics

Location of the various Clinics are shown on Page 6 of the Report.

### Inspection Clinic

The Inspection Clinic, at which the School Medical Officer examines childrenreferred for special examination, is held on Wednesday afternoons and Saturday mornings. During the year, 971 children paid 1199 visits to the 104Clinics which were held.

### Minor Ailments

Treatments are given every morningat the School Clinic, by a School Medical Officer assisted by two school nurses.

Table 6

Complaint	Cases	Attendances
Ringworm - Scalp ... ..	-	-
Body ... ..	-	-
Scabies .. ...	16	47
Impetigo . ...	38	338
Other Skin Diseases ...	229	1171
Minor Injuries ... ..	330	921
Verminous Head ... ..	67	220
Otorrhoea ... ..	2	4
Other ear defect or disease	81	143
Blepharitis ... ..	5	14
Conjunctivitis ... ..	2	3
Other external eye disease	33	60
Miscellaneous. . ...	28	44
Totals	831	2965

## Tonsils and Adenoids

In all, five hundred and seventy-four children were operated upon during the year, four hundred and forty-two at Queen's Park Hospital, one hundred and thirty-two at the Royal Infirmary. At the end of the year, there were two hundred and thirty-four children on the operation waiting list compiled by the School Health Service.

The department is notified of all children operated upon, to ensure follow-up on discharge.

## Visual Defects

The Authority has continued to use the Supplementary Ophthalmic Services for the supply of spectacles to school children. Three clinics are held each week, attended by the Consultant Ophthalmologist, Mr. P. R. Stevens.

During 1960, one thousand and eighty-three attendances were made at ninety-seven ophthalmic sessions. Of these attendances, two hundred and sixty-eight were new cases; spectacles were prescribed for four hundred and ninety children.

## Heart, Rheumatism and Anaemia Clinic

During the year, nineteen attendances were made at the Heart Clinic, conducted by the Consultant Cardiologist.

The following table sets out particulars of cases seen during the year:

Cases referred from Routine		Referred for Haemoglobin Estimation	-
Medical Inspection etc.	5	" " Electrocardiograph	1
Number of re-visits	14	" " X-Ray	1
Total attendances	19	" " Blood Sedimentation	
Cases discharged or left school	10		Rate -
Still on Register	5	Unfit for Exercises	-

Diagnoses arrived at -

Pulmonary stenosis	1	Subaortic stenosis	1
Patent ductus arteriosus	2	Functional bruit	1
Normal heart	2		

# Physiotherapy and Remedial Exercises Clinic

PATIENTS TREATED AT THE PHYSIOTHERAPY CLINIC AND AT THE OPEN AIR SCHOOL

Table 7

	PHYSIOTHERAPY CLINIC								OPEN AIR SCHOOL	
	REMEDIAL EXERCISES				ELECTRICAL TREATMENT					
	School		Pre-School		School		Pre-School			
	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances		
Breathing Exercises	65	1081	4	18	-	-	-	-	55	211
Postural Defects	20	250	-	-	-	-	-	-		
Spinal Curvature	4	38	-	-	-	-	-	-		
Poliomyelitis	2	65	-	-	2	65	-	-		
Congenital Defects	14	235	-	-	11	198	-	-		
Defects of the Feet	152	1805	23	238	1	8	-	-	12	32
Genu Valgum	33	389	35	300	-	-	-	-		
Result of Accident	4	61	-	-	4	61	-	-	1	
Asthma	5	50	-	-	-	-	-	-	9	28
Other	8	111	-	-	3	61	-	-	16	41
Totals	307	4085	62	556	21	393	-	-	87	312

## Ultra Violet Light Treatment

Two hundred and forty-five children underwent ultra violet light treatment and received a total of 3468 exposures, as follows:-

	<u>Cases</u>	<u>Exposures</u>
Physiotherapy Clinic	190	2065
Open Air School	55	1403
	<u>245</u>	<u>3468</u>

## Speech Clinic

During 1960, one hundred and two children received treatment at the Speech Clinic. Of these, 86 attended the Clinic whilst 16 children were treated weekly at Four Lanes End School. In all, 1570 attendances were made.

The number of children discharged was 11, whilst 48 remained on the waiting-list at the end of the year.

Most children have received individual treatment at weekly, fortnightly or stated intervals, but in order to accommodate

more children, small groups of 3 and 4 have been arranged whenever possible.

The following table sets out particulars of the work carried out during the year, including children treated at Four Lanes End School.

No. of children who received treatment	
during 1960	102
No. of attendances	1570
No. discharged	11
No. under treatment at end of year	91
No. on waiting list at end of year	48

### Orthoptic Clinic

As envisaged in my last Report, a second Orthoptist commenced duty in January, but our affluence was short-lived. By April, we had again been reduced to one when Miss Williams left to take up an appointment on the Continent.

Consequently, little headway was made during the year at reducing the waiting-list.

However, in December, two further appointments were made which are to take effect in January, 1961. The department will then be fully staffed and this will enable most, if not all, children on the waiting-list to be brought under treatment.

As will be noted in the following table, 6724 attendances were made during the year, by 782 children, of which 416 were County Cases.

	<u>Borough</u>	<u>County</u>	<u>Totals</u>
No. of Cases	366	416	782
No. of Attendances	2562	3162	6724
No. Discharged Cured	39		
No. Cosmetically Straight	82		
No. Left District	11		
No. Operated upon	63		
No. on List for Operation	40		

## Cleansing of Children

The School Nurses continue to pay regular visits to Schools to examine children for the presence of infestation. During 1960, 29,345 such examinations were made and 2,211 instances of infestation recorded.

The Clinic Attendant continued to carry out systematic cleansing, and in all nine thousand, two hundred and forty-five treatment were given, to 478 children.

All treatments were carried out in school.

## Audiometry

Routine hearing tests of children entering junior departments commenced in April. One part-time audiometrician tested 1,436 children, 1,050 passing the test covering six different frequencies, at not more than 20 Db loss. One hundred and thirty-six cases were referred to the special clinic for further investigation and two hundred and fifty who failed by narrow margins were listed for re-testing at the next visit to their schools.

A special audio-clinic is being held once weekly by a medical officer who has taken a week's course at Professor Ewing's department of Manchester University. There was some delay in setting up this clinic due to difficulty in finding accommodation and even now the rooms being used in the Antenatal Clinic are far from ideal since the background noise from traffic and the adjacent physiotherapy department is much too great to permit accurate tests to be performed. Examinations are often lengthy, as the whole case must be reviewed full histories taken, general examination of the child's nose and throat as well as auroscopic examination of the ears performed, and of course, a full audiogram taken. The recommendations after examining 56 cases at the special clinic were as follows:-

Referred to E.N.T. Consultant	25
For observation and retest after a period	12
For lip reading class	1
For breathing exercises	1
For forward placing in class	7
No further action required	10

It must not be thought that the ten cases requiring no action and the twelve for observation indicated wasted effort as many were due to simple disorders such as wax, catarrhal otitis media, etc., which were dealt with at the time. Also a number of the no action cases resulted from the noisy conditions under which testing has to be done in some schools.

Head and class teachers have shown great interest in this work, and our thanks must go to them for their co-operation, since many have suffered much inconvenience and extra work in arranging for the quietest room in their schools to be made available.

The numbers examined are as yet small so that judgment must be reserved, but it appears that some 4 to  $5\frac{1}{2}$  of children suffer some disability of hearing. In about one-third of these the defect was previously known (or suspected) but a surprising number had received some treatment but not all that was possible. So impressive is this failure to complete the treatment that as soon as a soundproof or suitably quiet room can be made available it would be advisable to follow up and perform audiograms on all school children discharged from hospital after treatment for ear, nose and throat conditions.

# SECTION THREE

## DENTAL INSPECTION AND TREATMENT

I am indebted to Mr. J. Rigby, L.D.S., Principal Dental Officer, for the following report on the work of the School Dental Service during 1960:-

A perusal of the 1939 Annual Report shows that three full-time dental officers were able to inspect rather more than 75% of the school population in a single year. During 1960, an almost identical percentage of children were inspected by two dental officers, which underlines the comment I made last year that due to our inability to appoint a third dental officer, less time can be devoted to treatment.

At 62%, the proportion of carious teeth is only slightly less than last year which is, nevertheless, a step in the right direction. It should be noted that this figure does not represent the percentage recommended for treatment, as a number of younger children with carious temporary teeth are left untreated, provided there is no apparent sepsis and where removal might lead to overcrowding in the succeeding permanent dentition.

Another welcome sign has been an increase in the number of fillings compared with extractions, especially with regard to permanent teeth, where the ratio is approximately two to one. Naturally, this trend towards conservation of the natural dentition should be the aim of any successful dental scheme, and in this respect the number of parents who refuse fillings for their children diminishes every year.

The number of casual cases, much the same as in 1959, averaged about twenty per week, the proportion of routine cases to emergency ones being about five to one.

With regard to improvements in the surgeries, more new equipment has been obtained which, it is hoped to supplement in 1961 by the purchase of an ultra high speed drill, to speed the preparation of cavities with less discomfort.

In the Orthodontic field, following a selective preliminary examination of cases initiated in 1959, the actual time between examination and treatment of all cases has been reduced, thus enabling more patients to be put on the list from the routine dental inspections. In practice, this has enabled the Orthodontist to take on more new patients.

Towards the end of the year, Assistant Medical Officers carried out a survey at one of the secondary modern schools; questions on oral hygiene were included, the result of which will be known in 1961.

In conclusion, I would like to thank again all concerned for their co-operation and help, Dr. C. Y. Howorth (Consultant Anaesthetist), Mr. Monks and Mr. Wild at the Blackburn Royal Infirmary - the latter until his sudden death in October - the teachers for their help at inspections, and particularly the dental staff for their ready help at all times.

J. RIGBY  
Principal Dental Officer.

The appended tables summarise the work done in the department during 1960:

ROUTINE DENTAL TREATMENT	
Permanent Teeth Filled	2284
Temporary Teeth Filled	108
Root Treatment	26
Extractions	4271
Other Operations	874
General Anaesthetics	521
Percentage who refused treatment	40
Percentage with dental caries	62
Percentage of appointments kept	89

ORTHODONTIC TREATMENT	
(By the Consultant Orthodontist, Mr. L.C.G.HODGKINS, L.D.S.)	
Cases carried over from previous year	45
Cases commenced during the year	16
Cases completed during the year	15
Cases discontinued during the year	6
Pupils treated with appliances	47
Removable appliances fitted	43
Fixed appliances fitted	3
Total number of attendances during the year	671

# D E N T A L T R E A T M E N T

Table 8

		No. of half-days devoted to inspection	No. of half-days devoted to treatment	No. of attendances made by children at clinic	Number of Permanent teeth		Number of Temporary teeth		Total Number of teeth		Administrations of Local Anaesthetics	Administrations of General Anaesthetic	Number of Other Operations					
					Extracted	Filled	Extracted	Filled	Extracted	Filled			Perm. Dress.	Perm. Scale	Temp. Dress.	Temp. Scale	Root Treatment	X-Ray
Routine	115	817	4672	979	2280	2202	107	3281	2387	986	520	663	43	-	-	-	26	149
Specials	-	-	1005	235	4	755	1	990	5	789	1	139	1	2	-	-	-	1
TOTAL	115	817	5677	1214	2284	2957	108	4271	2392	1775	521	802	44	2	-	-	26	150

Appointment to attend the clinic were made to the number of  
The number of appointments kept was  
The number of Routine cases completed was

1959	1960
4580	5268
4116	4672
1934	2067

# SECTION FOUR

## INFECTIOUS DISEASES

Information as to the incidence of non-notifiable infectious disease is obtained from teachers, welfare officers, public health inspectors, health visitors and parents.

The following table gives particulars of cases of infectious diseases occurring in school children during 1960.

Table 9

	Scarlet Fever	Diphtheria	Measles	Whooping Cough	Chicken Pox	Mumps	Dysentery	Primary Pneumonia	Acute Polio-myelitis	Cerebro- Spinal Fever
January	13	-	13	2	26	12	4	1	-	-
February	5	-	18	18	39	16	-	-	-	-
March	12	-	24	25	98	22	2	-	-	-
April	5	-	53	19	18	-	6	-	-	-
May	6	-	92	25	19	9	2	-	-	-
June	4	-	137	21	30	9	4	-	-	-
July )	-	-	56	59	4	-	4	-	-	-
August )	-	-	11	28	2	2	7	-	-	-
September	4	-	88	32	4	23	7	-	-	-
October	13	-	147	23	54	37	1	-	-	-
November	13	-	346	9	24	28	2	-	-	-
December	3	-								
TOTALS	78	-	985	261	318	158	39	1	-	-

# SECTION FIVE

## HANDICAPPED PUPILS

### Ascertainment

The arrangements for the ascertainment of pupils requiring special educational treatment are covered by regulation of the Minister of Education, and have been detailed in previous reports.

### Special School Provision

There are three special schools provided by the Authority, an Open Air School for Delicate children, a school for Partially Sighted Pupils in Corporation Park and the Four Lanes End School for Educationally Subnormal Pupils.

Partially Sighted Pupils are admitted to the Special School in Corporation Park. At the end of the year, ten children (four boys and six girls) were in attendance.

I append a report of the School's activities by the Headmaster, Mr. H. H. Evans:

"Twelve children, 6 boys and an equal number of girls were on roll at the beginning of the year, their ages ranging from 7+ to 14 years. Their mental age range was considerably wider scaling down to approximately 3 years at the lower end.

The fluxionary state brought about by the new type of child being admitted, and to which I referred in my last report, has continued this year, and it reflects great credit on my part-time staff that praiseworthy progress has been made towards the ultimate aim of equipping these children for their vital task of "living" to their maximum capacity. To this end the small, self-contained unit is, in my opinion, invaluable - particularly so when the relationship between children and staff is of the very best. We are acutely aware of the fact that our splendid isolation may tempt us to "over-insulate" the children, but great emphasis is placed on building up self-reliance in order to guard against this.

I have to report a constantly improving liaison with

all departments concerned with the children's education and well-being, and a special tribute is due to Nurse Wilson, our School Nurse, whose task this year has been by no means an easy one. The culmination of this should be realised in the near future when ALL the children in my charge will be under the professional care and surveillance of Mr. Stevens our new Ophthalmic Surgeon, who will then visit the school for what, I hope, will be the first of several "follow-up" visits. When one realises that the children now attending are drawn from towns as far apart as Burnley or the one side and Bolton on the other, and that, in all, four local education authorities have children placed in my school, then this liaison is very important indeed.

An innovation this year was the introduction of a model railway layout to the school. The boys were largely responsible for laying the track and wiring up the remote control points, whilst all the children helped in building tunnels, sidings, houses, etc. Part of the layout takes in the sea, and various types of vessels were modelled by the older boys and these were given a Group Work Prize at the Agricultural Show. When consideration is given to the children's limited vision, and in several cases additional physical handicap this achievement is particularly pleasing.

There were two children admitted during the year, a boy and a girl, both 8 year olds from Bolton Borough. Two boys were transferred to other schools, and a fourteen year old boy and a girl of the same age unfortunately died. So at the end of the year there are 10 on roll, 4 boys and 6 girls.

Children and two of the staff took advantage of Polio inoculations, and all children have been tested for ear defects by means of the new audiometer.

The year as a whole has given an opportunity to study the effect of the re-thinking and the shifting of emphasis from one part of the curriculum to another to which I referred last year, and whilst this is certainly not perfect, it can truthfully be described as working out very satisfactorily.

H. H. EVANS,

Headmaster."

### Open Air School

Thirty-nine children were admitted and thirty-five discharged during 1960, one hundred and seventy-seven being in attendance at the end of the year. The average duration of attendance of those discharged was two years nine months and the average increase in weight was ten pounds.

The reasons for the admission of the thirty-nine new

cases during the year were as follows:

Subnormal Nutrition	7	Bronchial Asthma	4
General Debility	11	Bronchitis	5
Old Pulm. T.B.	2	Rheumatism	4
Rheumatic Heart	1	Petit Mal	2
Congenital Deformity	1	Congenital Heart Disease	1
Muscular Paralysis		1	

Pupils are selected for admission by the School Medical Officer who re-examines them on admission to the school and at regular intervals thereafter. During the year, four hundred and eighty-two such inspections were made.

Each child has milk twice a day (taken with biscuit or sandwich) and a hot mid-day meal; there is a daily rest period of one hour. Eighty-four children have undergone courses of adexolin, fersolate, and other tonics.

Children suffering from Asthma have breathing and postural exercises from one of the Health Department Physiotherapists. Each child is given a weekly shower bath and is weighed at least once a month. The School Medical Officer examines each child at least every three months, whilst the School Nurse carried out regular cleanliness inspections and gave 158 children treatment for minor ailments.

Attendances during 1960 were satisfactory; average attendance was 147.7, the highest weekly percentage of average attendance being 90.5 per cent.

#### Educationally Subnormal Pupils

During the year, 100 children have been examined regarding their mental condition, with results as follows:-

Recommended for Special Day Schools	30
Recommended for Special Residential Schools	6
For supervision after leaving School	7
For report to Local Authority	8
Required no action	33
Decision deferred	14
Discharged from Special Day School	2

At the end of 1960, ninety-nine children (54 boys and 45 girls) were in attendance at the Four Lanes' End Special School.

I append the report of the Headmaster, Mr. F. Duerden, on the School's activities during the year.

"At the end of 1959 the number of children on roll was 102 (2 more than the maximum allowed by Ministry regulations). In 1960 this was adjusted by admitting 11 children from the waiting list although 13 left during the year. Of these 10 left for employment, 2 left town and one was transferred to the Open Air School on medical grounds. By the end of the year there were 48 children on the waiting list, officially ascertained as Educationally Sub-normal. Problems connected with this waiting list become more acute each year in so far that it has been found impossible to maintain a regular order of admission. The apparently obvious principle of first come, first served, only leads to further complications. The main difficulty is the lack of accommodation and internal organisational problems but a secondary difficulty arises in evaluating the varying degrees of urgency or priority noted in the medical reports. From year to year new forms of pressure are arising in this respect. There are indications that some parents are beginning to demand admission on behalf of their children, and are prepared to withdraw them from school until the L.E.A. are prepared to admit them here. Magistrates in the Children's Courts are becoming increasingly aware that conditions leading to some forms of delinquency can often be alleviated, or even cured, by the efforts of my staff, and consequent upon an appearance in Court urgent recommendations for admission are becoming more common. It is pleasing that the value of attendance here is realised in other quarters but these competing claims for places cannot be fully satisfied. I realise that the proposed extension of the school will solve many of these problems but even then I feel it is imperative to keep in mind that the school is primarily for E.S.N. children and that the main organisation should be framed with this in mind. Whilst provision should be made for varying categories within the framework of the organisation it is essential that these should be relatively small units. 'Sturdy independence' in an E.S.N. child is usually conspicuous by its absence and often remains so for a considerable period after admission, so that an overloading of one particular group could have severely adverse effects on the rest. The groups I have in mind could be typified by (a) children below the usually accepted I.Q., suspected of being ineducable and subject to further report; (b) children above the usual I.Q. whose attainment is very low; (c) children of differing religious persuasions; (d) delinquents referred by Courts; and (e) slightly maladjusted children. This latter group are a particular problem, since it is only with difficulty that psychiatric advice and treatment can be obtained. These children often drift into delinquency, and when that happens advice of the nature I have in mind is easily obtainable; but it appears to me to be somewhat reprehensible to be compelled to allow such a sequence of events to take place when avoiding action could so easily have been taken in the early stages. More in sorrow than anger I quote from my previous reports on the absence of a Child Guidance Clinic in Blackburn -

1955. The absence of such a Clinic is a major defect in the local Health Services. I entirely fail to see how the omission of such a vital service can be justified on any grounds whatsoever, nor do I believe that the need for it is confined to a few children attending this school.

1956. The setting up of such a Clinic should be given priority in planning the development of both the medical and education services.

1957. I would again point out that such a Clinic would be concerned with the whole child population of Blackburn and would materially assist the work of all concerned with Child Welfare.

1958. The continued absence of a Child Guidance Clinic is still hamstringing the remedial work for the maladjusted and more seriously disturbed children of Blackburn. Difficulties are constantly being encountered by the Magistrates of Juvenile Courts, the Probation Officers, the Children's Department, and all teachers in schools where the need for specialised treatment is recognised but there is none easily available. Financial considerations or staffing difficulties do not invalidate the fact that such a Clinic should be amongst the services of a progressive municipality.

1959. The impasse regarding treatment in a Child Guidance Clinic is apparently as far away from a solution as it has ever been.

An inordinate amount of time is spent in this school dealing with the personal problems of individual children, problems often only remotely connected with the formal work of the school. Organisation remains as flexible as possible to allow for dealing with this type of work although its current value cannot readily be assessed or possible results tabulated. Of necessity this care and attention mainly falls to me, and I am constantly faced with the choice of concentrating on routine work or making this more personal approach to individuals. I may be somewhat heretical, but I believe that this side of the work is likely to be of more value to the children in later life than the mere acquisition of knowledge and skills, important as they are. I am convinced that results will eventually accrue in terms of human happiness and mental well-being - after all a child with limited mental ability will always remain so but he need not grow up to be a wastrel. One side of our work, however, can readily be presented statistically, the results of standardised testing carried out each year. Although Number ability is also tested, I normally present details of Reading ability because they are less complex and more easily understandable by the lay mind. Each year I have been able to tabulate improvement during that year, and, of late, have been able to compare results with previous years. I must point out that there must be a limit to this general improvement since these are E.S.N. children and sooner or later must reach their own potential. Although as yet there is little indication that this point has been reached I suspect that we may be very near to it.

In the following reading results 'non-starter' is my own term for a child whose reading ability is so low that it does not appear on the scale we use which starts at 5 years. (Schonell's Test). For ease of interpretation it is generally accepted that a reading age of 10 years allows a person to read and reasonably understand a newspaper of the more popular type.

TABLE A		Reading Age at end of each Year											Non-	Original.
		14+	13+	12+	11+	10+	9+	8+	7+	6+	5+	Starters	N.S. now Started	
1955 (99 tested)		-	-	1	1	2	7	19	24	11	21	13	42	
1956 (99 " )		-	-	1	2	4	9	27	30	5	10	11	44	
1957 (98 " )		-	-	-	6	7	10	24	16	18	8	9	48	
1958 (100 " )		-	1	6	8	7	13	19	18	15	10	3	42	
1959 (95 " )		2	5	-	7	6	9	8	23	12	14	9	52	
1960 (99 " )		4	3	2	6	4	6	17	25	11	12	9	43	

Table D. Present Reading Ages of children now in school who were originally non-starters:

14+	13+	12+	11+	10+	9+	8+	7+	6+	5+
3	2	1	3	1	3	5	10	5	10

In interpreting the above results it must not be assumed that we have found a magic elixir which produces quick results. They represent consistent hard work and patience on the part of teachers and sustained effort on the part of the child. In Table D above, for instance, every child with a reading age of 9 or over has been under our tuition for at least 6 years.

An examination of the 1960 results compared with the Intelligence Quotients of the children concerned is interesting -

Delcw										
I.Q.	50	51-55	56-60	61-65	66-70	71-75	76-80	81-85	86-90	91-95
Children	3	4	7	14	20	18	18	12	2	1
<u>Average R.A (2.7)</u>	5.5	5.9	6.3	8.4	8.4	9.1	7.8	6.8	6.0	

In most E.S.N. schools the upper limit is often taken to be an I.Q. of 75 - from the above table it would appear that the group immediately above this has responded most to the teaching here, which was to be expected, from that point the higher I.Q.'s fall off in achievement - in other words there is some additional handicap besides pure lack of ability. This is also suggested by examining the 15 children on each side of the high scoring group.

I.Q.	81-95	Average R.A.	7.5 yrs.
I.Q.	61-75	Average R.A.	8.7 yrs.

This would appear to be additional proof that specialised advice is required for these children.

During the year we have been able to extend our out-of-school activities in the way of excursions, the primary purpose being to overcome the paucity of experience of many of our children. The highlight was a full day's excursion to Knaresborough and York with the intermediate and senior children. On these occasions we were impressed by the way the children conduct themselves, in particular at times when they are deliberately not under direct control.

Late in the year the Youth Employment Officer supplied me with his records of all the children who have left this school for employment since we opened. This will be a fruitful field for detailed study which I hope to undertake, but in general the over-all picture it gives is by no means a gloomy one. A preliminary examination of the list suggests certain trends in the employment record of these children. In our work here we habitually attempt to foresee what attitudes or characteristics are likely to be dominant in adult life. The employment list is particularly interesting in so far that in the majority of cases our estimates so far have been correct within rather fine limits. The 1960 leavers started the following jobs: Boys - 3 labourers, 1 vanboy, 1 spinning, 1 woodworker, 1 left town. Girls - 1 felter, 1 canteen worker, 1 slipper worker.

As essentially the life here is more sheltered than in other schools we have devoted considerable thought during the year to the

problem of preparing the older children for their more violent surroundings in industry. To this end, in collaboration with the Youth Employment Officer, we have extended our visits to industrial establishments and have arranged for periodic film shows showing conditions in various forms of employment. Visits have already taken place to a cotton mill, Mullard's and British Northrop, and a programme more particular for girls is already arranged. We are not concerned with preparing children for particular forms of employment but with attempting to introduce them to unfamiliar surroundings. I am grateful to the Youth Employment Officer for his kindly interest in our children and for the efforts he makes on their behalf after they have secured employment.

I am again pleased to report swimming successes which, considering the relatively small number of children involved, are most gratifying to us. This year, in addition to Learner and Progress Certificates, the children have gained 3 Elementary and 4 Intermediate Style Certificates, 12 Elementary and 2 Intermediate Life Saving Certificates and 4 Bronze Medallions. Apart from the children themselves this result reflects great credit on the members of my staff concerned and on the swimming instructors.

The perennial problem of 'practical instruction in handicraft and domestic training' became slightly easier during the year, especially in the case of the girls. By the end of the year 29 boys who were eligible by age had received no instruction whatever. At least 7 sessions are required for both subjects - from April, 4 were in operation (1 handicraft, 3 domestic). I am hoping that when our proposed premises are adapted there will be adequate provision for this most valuable side of our work.

The ancillary services connected with the school have functioned smoothly during the year, although the work of the visiting Speech Therapist was not as effective as it might have been, mainly due to illness. My thanks are due to the Chief Education Officer and his staff for consideration and help at all times. I am particularly grateful to the officials and staff of the Health Services whose help is available to me whenever it is requested, and to members of the various municipal services connected with child welfare.

I would like to place on record the devoted work of my Deputy Head, Miss H. Charnley, who was appointed Head of an E.S.N. School in Birmingham at the end of 1959. She played an invaluable part in the whole life of the school for five years. Fortunately the new staff member rapidly became 'indoctrinated' and has fitted in admirably, so that the loss has not been as serious as it could have been. It will be appreciated that in this kind of work much more than teaching ability is required and I am extremely grateful to the whole of my staff for their outstanding contributions to the life and work of the school and for all their help so freely and cheerfully given to the children and myself.

Frank Duerden.

Headmaster.

# HANDICAPPED PUPILS REQUIRING EDUCATION IN SPECIAL SCHOOLS

AT THE END OF THE YEAR

Table 10

	Newly placed In Spécial Schools	Newly Ascertained	Attending Special Schools:		Being+ educated under Section 56	Requiring+ places
			Day	Boarding		
Blind ... ..	1	2	-	5	-	1
Partially Sighted	-	-	3	-	-	-
Deaf ... ..	1	2	-	11	-	-
Partially Deaf ..	3	2	-	4	-	-
Delicate ... ..	35	32	161	6	3	4
Phys. Handicapped	2	3	11	7	2	1
Educationally Subn	13	36	99	9	-	60
Maladjusted .. ..	-	3	-	1	-	3
Epileptic ... ..	2	3	5	1	-	-
Totals	57	83	279	44	5	59

+ In conformity with Ministry of Education Form 21M, these figures are at  
January 20th, 1961, NOT December, 31st, 1960.

# ANALYSIS OF SPECIAL SCHOOLS TO WHICH BLACKBURN CHILDREN HAVE BEEN ADMITTED

On January 20th, 1961, 323 children (168 boys and 155 girls) were in special schools as follows:

## BLIND PUPILS

Boys Girls

Wavertree School, Liverpool ... ..	3
St. Vincent's, Liverpool . ... ..	1

## PARTIALLY SIGHTED PUPILS

Partially Sighted Class, Corporation Park, Blackburn ...	-
--	---

## DEAF PUPILS

Mary Hare Grammar School, Newbury .. ...	1
Royal Cross School for the Deaf, Preston .. ...	2
St. John's, Boston Spa ... ..	2
Old Trafford School . ... ..	1

## PARTIALLY DEAF PUPILS

School for the Partially Deaf, Liverpool ... ..	1
Thomasson Memorial School, Dalton ... ..	1

## DELICATE PUPILS

Ian Tetley School, Harrogate .. ...	2
Rudolph Steiner School, Aberdeen ... ..	1
Lostock Open Air School, Bolton ... ..	1
St. John's School, Woodford Bridge . ... ..	1
Black-a-Moor Open Air School .. ...	76

## EDUCATIONALLY SUBNORMAL PUPILS

Widdicombe House, Devon . ... ..	1
Four Lanes' End Special School ... ..	54
Pontville Special School, Ormskirk . ... ..	1
Crowthorn, Bolton ... ..	3
Rudolf Steiner, Aberdeen . ... ..	1
Eden Grove, Appleby . ... ..	1
Aldwark Manor .. ...	1

## MALADJUSTED PUPILS

Dreckenbrough School ... ..	1
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## EPILEPTIC PUPILS

Maghull, Liverpool .. ...	1
Black-a-Moor Open Air School .. ...	3

## PHYSICALLY HANDICAPPED

Black-a-Moor Open Air School .. ...	4
Dethesda Home, Manchester ... ..	-
Dirtenshaw Hall, Bolton .. ...	2
Singleton Hall . ... ..	1
Wm. Barker Technical, Hertford ... ..	1
Bradstock Lockett, Southport .. ...	1

# SECTION SIX

## MISCELLANEOUS

### Co-operation

Teachers, parents and School Welfare Officers have fully co-operated in the work of the School Medical Department. To them my thanks are expressed.

### National Society for the Prevention of Cruelty to Children.

Mr. D. J. Evans, Inspector of the Blackburn Branch, works in close association with the Health Visitors, and his continued help is much appreciated.

During the year 1960, eight cases were reported through the School Health Service, involving the welfare of nineteen children. All were cases of neglect and responded to warnings and supervision, and therefore no prosecution was necessary.

### Employment of Children and Young Persons

School Medical Officers examined 1070 children for employment during 1960.

Three hundred and ninety-five children (330 boys and 65 girls) were newly licensed for employment outside school hours, but no children were licensed to take part in entertainments.

### Deaths of School Children, 1960

Intestinal Condition	1
Poisoning	1

### Nursery Classes

There are thirty-five Nursery Classes in the Borough for the accommodation of children between the ages of three and five years. Inspection findings of children in attendance at these classes are incorporated in the appropriate group of Periodic Medical Inspection Tables.

The number of children on the rolls at the end of the

year was 1090.

School Nurses visit each Nursery Class at frequent regular intervals.

### Physical Education

I am indebted to the Chief Education Officer for the following Report on Physical Education in the Schools.

During the post war years attention has been focussed on the provision of adequate recreational facilities. It is probably true to say that school playing fields have increased in acreage more rapidly than any other recreation section. Not only is it now recognised that adequate area is necessary, but the standard and levels of the playing areas must be considered. The Ministry of Education have issued Building Bulletin No. 10 to serve as a guide in connection with the provision and construction of school playing fields alongside the building of new schools. Locally, the communal playing fields at Troy and Pleckgate have been over-used by schools and youth service for many years. Naturally the load at Pleckgate particularly, will decrease as new Secondary School sites are provided, but Pleckgate Playing Fields are still providing, and will continue to provide an excellent service for many schools.

The wisdom of the Committee in reseeding Griffin Football Ground, and subsequent limited use by schools, has resulted in a first class enclosed playing pitch and an excellent venue for inter-town school fixtures and other important matches.

The Blackburn Town Council were somewhat in advance of the Wolfenden Report when they provided Witton Park Athletics Track and pavilion. This is one of the finest in the Country and has been used extensively by schoolchildren during organised games sessions and school sports days.

### VISITS AND COURSES

During April, Mr. Barnard, H.M.I., arranged for several College Lecturers, Organisers of Physical Education and H.M. Inspectors to see demonstrations of free and spontaneous dance by classes at Lammack Primary School. It was felt that this type of spontaneous dance was suitable for and could be recommended for inclusion in physical education schemes at Primary School level. In May, a well-attended Physical Education Course for Junior School Teachers proved most successful and encouraging. During June, over one hundred teachers attended a physical education course suitable in Infant Schools, whilst a little later the attendance at a D.B.C. Music and Movement Course was most encouraging and gave a hint of the vital interest of teachers in this type of work.

### GAMES AND ATHLETICS

Blackburn has been well represented in the Lancashire and English School competitions for football, cricket, swimming and

athletics.

St. Peter's C.E. Secondary School reached the final of the Champion School Trophy of Lancashire for football but were beaten by a very good school side from Blackpool. The annual school football finals at Ewood Park were well supported by the public.

An encouraging and increased interest in tennis is shown in the Secondary Schools. Twenty teachers from these schools attended a Lawn Tennis Honorary Coaches' Training Course arranged by the Education Committee, and later fourteen of them took the examination for their Coaching Certificate. This excellent Course was well attended and most instructive and enjoyable.

Both Secondary and Primary Schools show a keen interest in netball, and the standard overall improves yearly. Many teachers attended a lecture-demonstration on coaching and umpiring, and much use has been made of the Netball Film purchased last year by the Committee. Netball rallies and tournaments were enthusiastically attended by teams from Secondary and Primary Schools.

Much interest is always shown in Athletics and practically every Secondary School holds its own annual, keenly contested Sports Day, and the Inter-Primary Schools' Area Sports and Finals maintained a good standard with very keen competition. More use than ever was made of the excellent track at Witton Park during school games periods, and for Secondary and Primary School sports events.

Teams of boys and girls from Blackburn did exceptionally well in the North-West Youth Activities Annual Athletics Festival held at St. Helens in July, 1960.

#### SWIMMING AND LIFE SAVING

It is increasingly difficult to provide adequate swimming instruction for all children of suitable age, and the need for new swimming baths is urgently felt. It is just possible to provide swimming instruction facilities for all children for the equivalent of two seasons of their school life, but more time is needed particularly for the "slow learners".

Great enthusiasm is shown in all schools and many difficulties of time-tableing and travelling are cheerfully borne, or overcome, by Head Teachers and assistant staffs. It is pleasing to note that once again the examinations for Style Certificates and the Royal Life Saving Society's awards were well attended, and an increased number of certificates in each case was awarded. In the R.L.S.S. Examinations, St. Mary's Secondary School for Boys gained the Maude Russell bowl for a second year in succession, and St. Peter's C.E. Secondary School for Boys gained the R.H.O. Hill Cup.

Number of children attending the swimming baths for swimming instruction during school hours:-

<u>Swimming Bath</u>	<u>Total Bathers</u>	<u>Weekly Average</u>
Delper Street (Boys)	29,286	1,331
Freckleton Street (Boys)	26,016	1,182
Blakey Moor (Girls)	40,194	1,827

### HARRISON GYMNASIUM

Full use is made of this excellent gymnasium during school hours when it is used mainly by the Technical and Grammar School. Evening recreational classes are well attended and the gymnasium is also used for netball by school children and Youth Clubs. It is a useful centre for Teachers' Course.

### DARTON STREET GYMNASIUM

The Technical and Grammar School have full use of this gymnasium during school hours and for activities after school. It is also used for recreational classes each evening and for Teachers' Courses and other activities when required.

Evening Class attendances at both gymnasia have been very gratifying.

## School Meals Service

Milk supplied in schools. During the year 2,650,048 bottles (each bottle containing  $\frac{1}{2}$  pint) were supplied to children free of charge.

### Meals supplied, Caring 1960

Meals supplied free (necessitous cases)	96,294
Meals supplied for payment	1,470,180
Special Schools (Paid 42,431 (Free 4,984	47,415
Occupation Centre	6,065
Total meals supplied during the year	<u>1,619,954</u>

Average daily number fed each month:

January	9068	May	9062	September	9556
February	9059	June	8560	October	9410
March	9086	July	8574	November	9350
April	8952	August	9655	December	9216
		96 (Holidays)			

# MINISTRY OF EDUCATION

## MEDICAL INSPECTION RETURNS

### MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND

### ASSISTED PRIMARY AND SECONDARY SCHOOLS

#### A. PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected	Number Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	%	No.	%
1956 & later	275	275	100	-	-
1955	290	290	100	-	-
1954	191	191	100	-	-
1953	66	66	100	-	-
1952	120	120	100	-	-
1951	46	46	100	-	-
1949	931	931	100	-	-
1948	455	455	100	-	-
1946	450	450	100	-	-
1945 & earlier	620	620	100	-	-
Total	3444	3444	100	-	-

#### B. PUPILS FOUND TO REQUIRE TREATMENT

Age Groups Inspected	For Defective Vision (excluding Squint)	For any of the other conditions recorded in Table 11	Total individual pupils
1956 & later	-	30	27
1955	1	19	20
1954	-	21	20
1953	2	10	10
1952	16	12	26
1951	5	-	5
1949	61	42	98
1948	46	33	75
1946	29	21	48
1945 & earlier	38	17	55
Total	198	205	384

#### C. OTHER INSPECTIONS

No. of Special Inspections	...	...	1493
No. of Re-inspections	...	...	1709
Total	..		<u>3202</u>

# DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

## PERIODIC INSPECTIONS

Table 11

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		Total	
		(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
4	Skin ... ..	1	1	19	-	11	1	31	2
5	Eyes - a. Vision . . .	1	-	67	-	130	5	198	5
	b. Squint . . .	15	3	1	-	6	-	22	2
	c. Other .. .	7	-	-	-	1	-	1	-
6	Ears - a. Hearing . . .	3	2	3	-	11	3	17	5
	b. Otitis Media. . .	2	-	1	-	1	-	4	-
	c. Other .. .	2	-	1	-	-	2	3	2
7	Nose and Throat .. .	16	12	-	-	19	9	35	21
8	Speech . . .	1	5	1	-	1	-	3	5
9	Lymphatic Glands . . .	-	2	-	-	-	-	-	2
10	Heart .. .	2	-	3	-	-	1	5	1
11	Lungs .. .	7	15	-	-	5	11	12	26
12	Developmental -	-	-	-	-	-	-	-	-
	a. Hernia . . .	2	2	-	-	3	-	5	2
	b. Other .. .	-	-	1	-	-	2	1	2
13	Orthopaedic -	-	-	-	-	-	-	-	-
	a. Posture . . .	-	-	-	-	12	1	12	1
	b. Feet ... .	5	1	8	7	9	3	22	4
	c. Other .. .	2	-	-	-	1	1	3	1
14	Nervous System -	-	-	-	-	-	-	-	-
	a. Epilepsy . . .	-	-	-	-	-	-	-	-
	b. Other .. .	-	-	-	-	-	-	-	-
15	Psychological -	-	-	-	-	-	-	-	-
	a. Development . .	1	2	-	-	6	17	7	19
	b. Stability ...	3	-	-	-	5	3	8	3
16	Abdomen. ... .	7	-	-	1	-	1	-	2
17	Other .. .	8	18	-	-	6	24	14	42

# SPECIAL INSPECTIONS

Table 12

Defect Code No.	Defect or Disease	SPECIAL INSPECTIONS	
		Requiring Treatment	Requiring Observation
4	Skin ... ..	1	-
5	Eyes - (a) Vision	78	3
	(b) Squint	13	-
	(c) Other	3	-
6	Ears - (a) Hearing	8	1
	(b) Otitis		
	Media	3	-
	(c) Other	1	-
7	Nose and Throat ..	50	11
8	Speech . ... ..	14	6
9	Lymphatic Glands ,	-	-
10	Heart .. ... ..	-	-
11	Lungs .. ... ..	10	3
12	Developmental ...		
	(a) Hernia	-	-
	(b) Other	1	11
13	Orthopaedic -		
	(a) Posture	9	-
	(b) Feet	11	1
	(c) Other	14	4
14	Nervous System -		
	(a) Epilepsy	-	-
	(b) Other	-	-
15	Psychological -		
	(a) Development	1	2
	(b) Stability	1	2
16	Abdomen. ... ..	-	-
17	Other .. ... ..	21	28

Table 13

## INFESTATION WITH VERMIN

- (i) Total number of individual examination in the schools by the school nurses or other authorised persons .. ... 29345
- (ii) Total number of individual pupils found to be infested ... .. 478
- (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) . ... -
- (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) .. ... -

# TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

Table 14

## GROUP A - EYE DISEASES, DEFECTIVE VISION AND SQUINT

	No. of cases known to have been dealt with
External and other, excluding errors of refraction and squint	44
Errors of refraction (incl. squint)	1104
Total	1148
Number of pupils for whom spectacles were prescribed	490

## GROUP B - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	No. of cases known to have been dealt with
Received operative treatment -	
(a) for diseases of the ear	42
(b) for adenoids & chronic tonsillitis	574
(c) for other Nose and Throat conditions	99
Received other Forms of treatment	312
Total	1027
Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1960	8
(b) in previous years	6

## GROUP C - ORTHOPAEDIC AND POSTURAL DEFECTS

	No. of cases known to have been dealt with
(a) Pupils treated at clinics or out-patient departments	351
(b) Pupils treated at school for postural defects	55
Total	406

GROUP D - DISEASES OF THE SKIN (excluding uncleanness, for which see Table 13)

	No. of cases known to have been dealt with
Ringworm - (i) Scalp ... ..	-
(ii) Body ... ..	-
Scabies ... ..	16
Impetigo ... ..	38
Other Skin Diseases .. ...	229
Total	283

GROUP E - CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority ... ..	-
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GROUP F - SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority ... ..	102
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GROUP G - OTHER TREATMENT GIVEN

(a) Number of miscellaneous minor ailments treated by the Authy	358
(b) Pupils who received convalescent treatment under School Health Service arrangements .. ...	Nil
(c) Pupils who received B.C.G.	653
(d) Others (Specify)	
1. Orthoptics .. ...	366 +
2. Sunlight ... ..	245
3. Cleansing ... ..	478
Totals (a - d)	2100

+ In addition, 416 Lancashire County Council pupils were dealt with during the year.

# DENTAL INSPECTION AND TREATMENT

Table 15

(1)	Number of pupils inspected by the Authority's Dental Officers:-								
(a)	At Periodic Inspections	..	...	...	...	...	...	...	13,4
(b)	At Specials	...	...	...	...	...	...	...	1,0
								Total (1)	14,4
(2)	Number found to require treatment								7,01
(3)	Number offered treatment								7,01
(4)	Number actually treated								3,27
(5)	Number of attendances made by pupils for treatment,								
	including those recorded at heading 11(h)								5,67
(5)	Half-days devoted to:	Periodic (School) Inspection	...	...	...	...	...	...	11
		Treatment	..	...	...	...	...	...	81
								Total (6)	93
(7)	Fillings:	Permanent Teeth	...	...	...	...	...	...	2,32
		Temporary Teeth	...	...	...	...	...	...	11
								Total (7)	2,67
(8)	Number of teeth filled:	Permanent Teeth	...	...	...	...	...	...	2,284
		Temporary Teeth	...	...	...	...	...	...	108
								Total (8)	2,392
(9)	Extractions:	Permanent Teeth:	...	...	...	...	...	...	1,214
		Temporary Teeth:	...	...	...	...	...	...	2,957
								Total (9)	4,271
(10)	Administration of general anaesthetics								521
(11)	Orthodontics:								
(a)	Cases commenced during the year								36
(b)	Cases carried forward from previous year								45
(c)	Cases completed during the year								27
(d)	Cases discontinued during the year								12
(e)	Pupils treated with appliances								67
(f)	Removable appliances fitted								67
(g)	Fixed appliances fitted								3
(h)	Total attendances								671
(12)	Number of pupils supplied with artificial dentures								29
(13)	Other operations:								
		Permanent Teeth	...	...	...	...	...	...	874
		Temporary Teeth	...	...	...	...	...	...	874
								Total (13)	874

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Cleansing ... ..	18	Open Air School ... ..	25
Clinics, list of ... ..	6	Orthodontic Treatment ... ..	21
Condition, General ... ..	10	Orthopaedics ... ..	11
Cost of School Health Service ..	7	Orthoptic Clinic ... ..	17
Deaf Pupils ... ..	31,32	Parents, Attendances at	
Deaths of School Children ...	33	Routine Inspection	10
Delicate Pupils ... ..	31,32	Partially Deaf Pupils ... ..	31,32
Dental Inspection & Treatment ..	20	Partially Sighted Pupils ...	24,31,32
Developmental ... ..	12	Physical Education ... ..	34
Ear, Nose and Throat ... ..	11	Physically Handicapped Pupils	31,32
Education Committee ... ..	1	Physiotherapy ... ..	16
Educationally Subnormal Pupils	26,31,32	Population, School ... ..	8
Employment of Children ... ..	33	Provision of Meals ... ..	36
Epileptic Pupils ... ..	31,32	Psychological Defects ... ..	12
Eye Troubles ... ..	10,15	Rheumatism ... ..	15
General Condition ... ..	10	School Meals ... ..	36
Handicapped Pupils ... ..	24	School Nurses, Work of ...	13
Hearing ... ..	11	Skin Diseases ... ..	12
Heart Defects ... ..	12	Special Schools ... ..	24
Heart, Rheumatism & Anaemia Clinic	15	Speech Therapy ... ..	16
Heights and Weights ... ..	12	Staff of School Health Service	2
Infectious Diseases ... ..	23	Strabismus (Squint) ... ..	17
Inspection Clinic ... ..	14	Throat Defects ... ..	10,15
Inspection, Dental ... ..	20	Treatment, Dental ... ..	20
Inspection, Medical ... ..	9	Treatment, Medical ... ..	14
Lung Defects ... ..	12	Ultra Violet Light Clinic ...	16
Lymphatic Glands ... ..	12	Vision ... ..	10,15
Maladjusted Pupils ... ..	31,32		
Medical Inspection ... ..	9		
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